| PATENT APPLICATION FEE DETERMINATION RE  |   |   |   |   |                     |   |            | RD                                      | Application of Docket Number |            |                  |                        |
|--|---|---|---|---|---------------------|---|------------|---|------------------------------|------------|------------------|------------------------|
| Effective December 8, 2004   |   |   |   |   |                     |   |            | •                                       | 10/564640                    |            |                  |                        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |   |   |                     |   |            | SMALL ENT                               | ITY                          | OR         | OTHER<br>SMALL E |                        |
| u.s  | . NATIONAL S  | STAGE FEES                                      | (0.0.0  |   | <del>, '</del>      | Column 2)   | Γ          | RATE                                    | FEE                          | l          | RATE             | FEE                    |
| BASIC FEE  |   |   | SMALL ENT. = \$ 150   |   | LARC                | SE ENT. = \$ 300  | -          | BASIC FEE                               |                              | ΛP         | BASIC FEE        |                        |
| EXAMINATION FEE  |   |   | Satisfies PCT Article 33(1)-  |   | All ot              | her situations =  | ŀ          | XAM. FEE                                | <del>-</del>                 |            | EXAM, FEE        | 300                    |
| SEARCH FEE   |   |   | (4) = \$50 / \$ 100<br>U.S. is ISA = \$50 / \$ 100<br>ALL other countries = |   | ALL o               | \$ 100 / \$ 200  ALL other situations = \$ 250 / \$ 500 |            | SEARCH FEE                              |                              |            | SEARCH FEE       | (400                   |
| FEE FOR EXTRA SPEC. PGS.   |   |   | \$ 200 / \$ 4   | 400<br>IS 100 =                         | /50 =               |   |            | X \$ 125 =                              |                              |            | - V 6:0F0        | 800                    |
|  |   |   | -   |   |                     | 7 30 2  | ŀ          |   |                              |            | " X \$ 250 =     |                        |
| TOTAL CHARGEABLE CLAIMS  |   |   |   | us 20 =                                 |                     |   | ŀ          | X \$ 25 =                               |                              | OR         | X \$ 50 =        |                        |
| INDI   | EPENDENT CL   | AIMS  | mi  | inus 3 =                                | *                   |   | ŀ          | X \$ 100 =                              |                              | OR         | X \$ 200 =       |                        |
|  |   | DENT CLAIM PRI                                  |   | N                                       |                     |   | L          | + \$ 180 =                              |                              | OR         | + \$ 360 =       | ·                      |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |   |   |                     |   |            | TOTAL                                   |                              | OR         | TOTAL            | 900                    |
| <br> -   | CLAIMS AS AMENDED - PART II H 3-06 (Column 1) (Column 2) (Column 3) |   |   |   |                     |   |            | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                              |            |                  |                        |
| AMENOMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT       |   | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>DUSLY        | PRESENT<br>EXTRA  |            | RATE                                    | ADDI-<br>TIONAL<br>FEE       |            | RATE             | ADDI-<br>TIONAL<br>FEE |
|  | Total   | . 9   | Minus   | - 2                                     | 0                   | = O   | ſ          | X \$ 25 =                               |                              | OR         | X \$ 50 =        | Ó                      |
|  | Independent   | • 1 .   | Minus   | ***                                     | 3                   | = 0   |            | X \$ 100 =                              |                              | OR         | X \$ 200 =       | 0                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                      |   |   |   |                     |   |            | + \$ 180 =                              |                              | OR         | + \$ 360 =       | . 0                    |
|  |   | 7   | OTAL ADDIT.   |   | ÖR                  | TOTAL ADDIT.  | 0          |   |                              |            |                  |                        |
|  |   |   |   |   |                     |   |            |   |                              |            |                  |                        |
| AMENDMENT 8  |   | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |   | (Colur<br>HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>OUSLY | PRESENT<br>EXTRA  | ſ          | RATE                                    | ADDI-<br>TIONAL<br>FEE       |            | RATE             | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus   | **                                      |                     | =   | Ī          | X \$ 25 =                               |                              | OR         | X \$ 50 =        |                        |
|  | Independent   | •   | Minus   | ***                                     |                     | 8   | ľ          | X \$ 100 =                              | -                            | OR         | X \$ 200 =       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT (                          |   |   | CLAIM                                   |                     | T   | + \$ 180 = |   | OR                           | + \$ 360 = |                  |                        |
|  |   |   |   |   |                     |   | 7          | OTAL ADDIT.                             |                              | OR         | TOTAL ADDIT.     |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20",  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |   |   |                     |   |            |   |                              |            |                  |                        |